



HOUSE OWNER/HOUSEHOLD CONTENTS CLAIM FORM

INSURED DETAILS:

Name:..... Policy No.....

Address:.....

Telephone Numbers:..... Email:.....

If you are VAT registered, please provide Registration number:.....

INCIDENT DETAILS:

Date and time of incident:..... When was the incident discovered?.....

Explain fully how the incident occurred.....

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Was your home occupied at the time of the incident and by whom?.....

If unoccupied at the time of incident, state date and time last occupied and by whom?.....

Please give details of other insurance policy, if any, covering the property for which you are claiming.....

Name and address of Insurance company.....

When/which Police station notified and their reference number?.....

BUILDINGS:

Estimated cost of repair:.....

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If you are a tenant and legally liable for the repairs, please send us a copy of the agreement, and state 'Yes' here:.....

CONTENTS:

Please provide details of all items lost, damaged or stolen, AND send estimates for repair/replacement/original purchase receipts

<u>Description of item (including make and model)</u>	<u>Purchase Date</u>	<u>Purchase Price</u>	<u>Estimated cost of repair or replacement</u>
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DECLARATION:

I/We declare that all the answers are true and complete and agree that if I have made any false or fraudulent statement or suppression or concealment, the policy shall be cancelled and the claim shall be forfeited.

I/We have received a list of documents with this claim Form and have understood all the requirements to be fulfilled for administration of this claim and the Company shall not be held responsible for any delay in settlement of claim due to nonfulfillment of requirements including the documents as mentioned above.

I/We agree to provide additional information to the Company, if required.

Signature..... Name..... Date and Place.....